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## SUPPLEMENTAL DECLARATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

### METHOD AND APPARATUS FOR SELECTING SATELLITE AUDIO RADIO CHANNELS

having serial no 09/922,487 and was filed on August 3, 2001.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to herein.

I acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or 365(b), of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

#### FOREIGN PRIORITY APPLICATION(S)

(Number)	(Country)	(Day/month/year filed)	Priority Claimed <input type="checkbox"/> Yes <input type="checkbox"/> No
(Number)	(Country)	(Day/month/year field)	Priority Claimed <input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional patent application(s) listed below and have also identified below any United States provisional patent application(s) having a filing date before that of the application on which priority is claimed.



## **PROVISIONAL PRIORITY PATENT APPLICATION**

**Priority Claimed**

[X] Yes [ ] No

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(Application No.) (Filing Date)

[ ] Yes [ ] No

And I hereby appoint, Mathew I. Cohen, Reg. No. 48,133, with the telephone number of 215-569-9701 as my attorney or agent with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence to **Chris Halliday, 900 Spring City Road, Phoenixville PA 19460**, with telephone contact information as follows: 484-431-5477. I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of  
inventor Christopher I. Halliday

Inventor's Signature 

Date 6/28/07

**Residence** 900 Spring City Road

Citizenship    United States \_\_\_\_\_

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